

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <b>1081-0368</b>	FILING DATE			
							APPLICANT(S)				
							CLAIMS				
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT						
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1			1				51				
2							52				
3							53				
4							54				
5							55				
6							56				
7							57				
8							58				
9			1				59				
10							60				
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43							93				
44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.			2				TOTAL IND.				
TOTAL DEP.			12				TOTAL DEP.				
TOTAL CLAIMS			14				TOTAL CLAIMS				

PTO-1350 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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